Case 19-02902-dd Doc 12 Filed 06/19/19 Entered 06/19/19 13:21:55 Desc Main Document Page 1 of 39

Fill in this info					
Debtor 1					
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		DISTRICT OF SOUTH	CAROLINA		
Case number	19-02902				
(if known)	10-02002				☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file

		Your a	ssets of what you own
		value	or what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	98,175.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	12,343.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	110,518.00
Pa	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	208,289.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	1,730.00
	Your total liabilities	\$	210,019.00
Pa	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,425.54
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,394.00
Pa	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other scl	hedules.
7.	■ Yes What kind of debt do you have?		

- household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Frank Gary James, Jr Case number (if known) 19-02902

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____4,352.89

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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	0 0 0 0 0 0 0 0 0 0		Dog	cument	Page 3 of 39			
ill in this informati	on to identify y	our case and th	nis filinç	g:				
ebtor 1	Frank Gary Ja	ımes, Jr						
ebtor 2	First Name	Middle	Name		Last Name			
_	First Name	Middle	Name		Last Name			
nited States Bankru	uptcy Court for th	ne: DISTRICT	OF SOL	JTH CAROLI	NA			
ase number 19-0	2002							
ase number	02902				_			☐ Check if this is a amended filing
fficial Form	106A/B							
chedule		norty						12/15
		<u> </u>		1 16	an asset fits in more than one		446 42 .	
☐ No. Go to Part 2. Yes. Where is the	property?		What	is the propert	ty? Check all that apply			
4501 Armfield	d Road			Single-family	home	Do not ded	uct secured cla	aims or exemptions. Put
Street address, if ava	ailable, or other descri	ption		Duplex or mu	ulti-unit building			d claims on Schedule D: ms Secured by Property.
				Condominiun	m or cooperative			
				Manufactured	d or mobile home			
Effingham	sc	29541-0000		Land		Current va entire prop		Current value of the portion you own?
City	State	ZIP Code		Investment p	roperty	\$9	8,175.00	\$98,175.0
				Timeshare				our ownership interest
			_	Other	st in the property? Check one	•	ee simple, ten e), if known.	ancy by the entireties, o
				Debtor 1 only	• • •	Fee Sim	ple	
Florence				Debtor 2 only	/			
County					Debtor 2 only			munity property
					of the debtors and another		structions)	
				r information y erty identificat	you wish to add about this ite tion number:	m, such as lo	cal	
				•	8-297 & TMS#: 00250-0	1-132, 1996	6 Palm Har	bor Mobile
					acres of land, 28x65; Cu		perty tax va	alue: \$98,175;
			Valu	ie pursuant	t to debtor's opinion: \$7	70,000		
. Add the dollar v	alue of the port	tion you own fo	r all of	your entries	from Part 1, including any	entries for		444 4
pages you have	attached for Pa	art 1. Write that	numbe	r here			=>	\$98,175.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1 Case 19-02902-dd Doc 12 Filed 06/19/19 Entered 06/19/19 13:21:55 Desc Main Document Page 4 of 39

Frank Gary James Jr Case number (if known) 19-02902

Debt	or 1 Frank Gary	James, Jr		Case number (if known)	19-02902
3 Ca	rs, vans, trucks, trac	tors. sport utility ve	hicles. motorcycles		
	,,,	,	,		
	No				
	Yes				
3.1	Make: GMC		Who has an interest in the property? Check one		cured claims or exemptions. Put secured claims on Schedule D:
	Model: Z71		■ Debtor 1 only		ve Claims Secured by Property.
	Year: 1994		Debtor 2 only	Current value of	the Current value of the
	Approximate mileage:	376,891	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other information:		lacksquare At least one of the debtors and another		
	VIN#: 1GTEK19K7			\$1,775	5.00 \$1,775.00
	door, 8 cylinder, I	NADA Value:	☐ Check if this is community property (see instructions)	Ψ1,773	σι,775.00
	\$1,775		(
	01			Do not doduct coo	cured claims or exemptions. Put
3.2	Make: Chevrole	-τ	Who has an interest in the property? Check one	the amount of any	secured claims on Schedule D:
	Model: Tahoe		Debtor 1 only	Creditors Who Ha	ve Claims Secured by Property.
	Year: 2004	400 700	Debtor 2 only	Current value of	
	Approximate mileage: Other information:	163,722	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	VIN#: 1GNEC13Z3	24 1204083 4	☐ At least one of the debtors and another		
	door, 8 cylinder, I		☐ Check if this is community property	\$2,200	0.00 \$2,200.00
	\$2,200		(see instructions)		
5 1	dd the dollar value of	the portion you ow	n for all of your entries from Part 2, includin	a any entries for	
			that number here		\$3,975.00
	_				
Part 3		onal and Household It			
ро у	ou own or nave any I	egal or equitable in	terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
E)	ousehold goods and f xamples: Major appliar No		, china, kitchenware		
	Yes. Describe				
		Household Goo	ds; All household goods, including, bu	ut not limited	
			pliances, kitchenware, household tools		
		decorations, et	2.		\$3,000.0
. Ele	ectronics				
	xamples: Televisions a		eo, stereo, and digital equipment; computers, p	rinters, scanners; music c	collections; electronic devices
_	•	pnones, cameras, n	nedia players, games		
_	No Van Bannika				
	Yes. Describe				
		Electronics			\$900.00

Official Form 106A/B Schedule A/B: Property page 2

Doc 12 Filed 06/19/19 Entered 06/19/19 13:21:55 Desc Main Case 19-02902-dd Page 5 of 39 Document Case number (if known) 19-02902 Frank Gary James, Jr 8. Collectibles of value

<i>J</i> .	other collect	f figurines; paintings, prints, or other artwork; books, pictures, or other art objects; starions, memorabilia, collectibles	np, coin, or baseball card collections;
	■ No		
	☐ Yes. Describe		
9.	Equipment for sports a Examples: Sports, photo musical insti No	ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis;	canoes and kayaks; carpentry tools;
	☐ Yes. Describe		
10.	Firearms	s, shotguns, ammunition, and related equipment	
	□ No	s, shotgans, animanition, and related equipment	
	Yes. Describe		
		Firearms: Virginia Arms 12 gauge Shot Gun: Value: \$800, Mossburg 12 gauge shot gun: Value: \$200, Smith & Wesson 357 Mag; Value: \$200	\$1,200.00
11.	Clothes Examples: Everyday c □ No ■ Yes. Describe	lothes, furs, leather coats, designer wear, shoes, accessories	
		Assorted Used Clothing	\$100.00
12.	Jewelry Examples: Everyday je □ No ■ Yes. Describe	ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches,	gems, gold, silver \$600.00
		Jewelry	
	Non-farm animals Examples: Dogs, cats, No Yes. Describe Any other personal ar No Yes. Give specific in	nd household items you did not already list, including any health aids you did no	ot list
15		of all of your entries from Part 3, including any entries for pages you have attac number here	hed \$5,800.00
	rt 4: Describe Your Final		
Do	o you own or have any	legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	□ No	have in your wallet, in your home, in a safe deposit box, and on hand when you file yo	our petition
		Cash	\$1,200.00
_			<u> </u>

Debtor 1

Case 19-02902-dd Doc 12 Filed 06/19/19 Entered 06/19/19 13:21:55 Desc Main Document Page 6 of 39 Case number (if known) Debtor 1 19-02902 Frank Gary James, Jr 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... First Reliance Bank \$168.00 Checking 0546 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture □ No Yes. Give specific information about them..... Name of entity: % of ownership: Gary James Construction: Business is a sole-proprietorship operating as a contractor. Business has no assets, no employees and no 100% \$0.00 account receivables. % 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No ☐ Yes. Give specific information about them...

Official Form 106A/B Schedule A/B: Property page 4

☐ Yes. Give specific information about them...

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

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	Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses ■ No	s, professional licen	ses
	Yes. Give specific information about them		
M	oney or property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	. Tax refunds owed to you		
	□ No		
	Yes. Give specific information about them, including whether you already filed the returns and to	the tax years	
	2019 Tax Refund: Unknown 2018 Tax Refund: \$0.00	Federal	Unknown
	2019 Tax Refund: Unknown 2018 Tax Refund: \$1,366; already received	State	Unknown
	 Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce No Yes. Give specific information 	settlement, propert	y settlement
	 Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation probenefits; unpaid loans you made to someone else No □ Yes. Give specific information 	ay, workers' compo	ensation, Social Security
31.	 Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner ■ No 	's, or renter's insura	ance
	☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary:		Surrender or refund value:
	 Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are cur someone has died. ■ No □ Yes. Give specific information 	rently entitled to re-	ceive property because
33.	 Claims against third parties, whether or not you have filed a lawsuit or made a demand for Examples: Accidents, employment disputes, insurance claims, or rights to sue No 	payment	
	☐ Yes. Describe each claim		
	. Other contingent and unliquidated claims of every nature, including counterclaims of the o ■ No	debtor and rights	o set off claims
	Yes. Describe each claim		
	. Any financial assets you did not already list □ No		
	■ Yes. Give specific information		
	Ongoing Social Security		\$0.00

Official Form 106A/B Schedule A/B: Property page 5

Debtor 1

	Case 19-029	902-dd	Doc 12	Filed 06/19/19 Document I	Entered 0 Page 8 of 39)6/19/19 13:21:55 ¹	5 Desc Main
Debtor 1	Frank Gary J	ames, Jr		- Boodinent 1			19-02902
						1	
				n Part 4, including any			\$1,368.00
Part 5:	Describe Any Busine	ss-Related P	Property You Ov	vn or Have an Interest In.	List any real estate	in Part 1.	
				any business-related pro			
	Go to Part 6.			, ,	•		
Yes.	Go to line 38.						
							Current value of the portion you own? Do not deduct secured claims or exemptions.
38. Acco	unts receivable or	commissi	ons you alrea	idy earned			
■ No	s. Describe						
□ 163	s. Describe						
39. Office Exam	e equipment, furni mples: Business-rela	shings, and ated compu	d supplies iters, software,	modems, printers, copi	ers, fax machines,	rugs, telephones, desks,	chairs, electronic devices
	s. Describe						
■ Yes	s. Describe	cordless	impact gun	2 Dewalt cordless so , 1 Dewalt cordless			
		1 Cline b	ullpen; Valu	ıe: \$1,200			\$1,200.00
41. Inve n ■ No □ Yes	-						
42. Intere	ests in partnership	s or joint v	ventures				
■ No	s. Give specific info	ormation abo	out them				
	s. Give specific fine		of entity:			% of ownership:	
43. Custo	omer lists, mailing	lists, or ot	ther compilati	ons			
□ ро у	our lists include per	sonally iden	tifiable informa	tion (as defined in 11 U.S.	C. § 101(41A))?		
	■ No □ Yes. Describe						
44. Any t ■ No	business-related p	roperty yo	u did not alre	ady list			

Official Form 106A/B Schedule A/B: Property page 6

☐ Yes. Give specific information.......

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	Document	raye 9 01 3		
Deb	tor 1 Frank Gary James, Jr		Case number (if known)	19-02902
45.	Add the dollar value of all of your entries from Part 5, includin for Part 5. Write that number here			\$1,200.00
Part	6: Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46. l	Do you own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
	No. Go to Part 7.			
	☐ Yes. Go to line 47.			
Part	7: Describe All Property You Own or Have an Interest in That You	ı Did Not List Above		
53. I	Do you have other property of any kind you did not already list	?		
	Examples: Season tickets, country club membership			
	No			
_	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write the	at number here		\$0.00
			Į	
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$98,175.00
56.	Part 2: Total vehicles, line 5	\$3,975.00		
57.	Part 3: Total personal and household items, line 15	\$5,800.00		
58.	Part 4: Total financial assets, line 36	\$1,368.00		
59.	Part 5: Total business-related property, line 45	\$1,200.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$12,343.00	Copy personal property to	stal \$12,343.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$110,518.00

Official Form 106A/B Schedule A/B: Property page 7

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Fill in this infor					
Debtor 1	Frank Gary Jame	s, Jr			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		DISTRICT OF SOUTH (CAROLINA		
Case number	19-02902				
(if known)				☐ Check if this is ar amended filing	1

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2. Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	identity	tne Pro	perty	You Cla	aim as	Exempt

Pa	rt 1: Identify the Property You Claim as E	xempt									
1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.										
	■ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)							
	☐ You are claiming federal exemptions. 11 to	J.S.C. § 522(b)(2)									
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.										
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption						
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.							
	4501 Armfield Road Effingham, SC 29541 Florence County TMS#: 97000-28-297 & TMS#: 00250-01-132, 1996 Palm Harbor Mobile Home & 16.48 acres of land, 28x65; Current property tax value: \$98,175; Value pursuant to debtor's opinion: \$70,000 Line from Schedule A/B: 1.1	\$98,175.00		\$54,875.00 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(1)(a)						
	1994 GMC Z71 376,891 miles	\$1,775.00		\$1,775.00	S.C. Code Ann. §						
	VIN#: 1GTEK19K7RE550662, 2 door, 8 cylinder, NADA Value: \$1,775 Line from Schedule A/B: 3.1)r, —————		100% of fair market value, up to any applicable statutory limit	15-41-30(A)(7) of unused (A) (1)						
	2004 Chevrolet Tahoe 163,722 miles VIN#: 1GNEC13Z34J294983, 4 door, 8	\$2,200.00		\$6,100.00	S.C. Code Ann. § 15-41-30(A)(2)						
	cylinder, NADA Value: \$2,200 Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit	13						
	Household Goods; All household	\$3,000,00		\$3,000,00	S.C. Code Ann. §						

\$3,000.00

100% of fair market value, up to

any applicable statutory limit

15-41-30(A)(3)

etc.

\$3,000.00

goods, including, but not limited to,

furniture, appliances, kitchenware,

Line from Schedule A/B: 6.1

household tools, home decorations,

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tor 1	Frank Cary James Jr	Document	Р	rage 11 of 39	40.02002
	Frank Gary James, Jr	0		Case number (if known)	19-02902
	lescription of the property and line on ule A/B that lists this property	Current value of the portion you own		ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Cne	ck only one box for each exemption.	
	ronics rom Schedule A/B: 7.1	\$900.00		\$900.00	S.C. Code Ann. § 15-41-30(A)(3)
LINC	om ochedale AD.			100% of fair market value, up to any applicable statutory limit	10 41 00(11)(0)
	rms: Virginia Arms 12 gauge Gun: Value: \$800, Mossburg 12	\$1,200.00		\$1,200.00	S.C. Code Ann. § 15-41-30(A)(15)
gaug & We	e shot gun: Value: \$200, Smith esson 357 Mag; Value: \$200 com Schedule A/B: 10.1			100% of fair market value, up to any applicable statutory limit	
	rted Used Clothing	\$100.00		\$100.00	S.C. Code Ann. §
Line ti	rom Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	15-41-30(A)(3)
Jewe	elry rom Schedule A/B: 12.1	\$600.00		\$600.00	S.C. Code Ann. § 15-41-30(A)(4)
Line ii	om Schedule Arb. 12.1			100% of fair market value, up to any applicable statutory limit	15-41-30(A)(4)
Cash	rom Schedule A/B: 16.1	\$1,200.00		\$1,200.00	S.C. Code Ann. § 15-41-30(A)(7) of unused (A
Line ii	om Schedule Arb. 16.1			100% of fair market value, up to any applicable statutory limit	(1)
	king 0546: First Reliance Bank	\$168.00		\$168.00	S.C. Code Ann. §
Line ii	om Schedule Arb. 17.1			100% of fair market value, up to any applicable statutory limit	15-41-30(A)(7) of unused (A (1)
	James Construction: Business cole-proprietorship operating as	\$0.00		\$0.00	S.C. Code Ann. §
a cor asset	ntractor. Business has no its, no employees and no unt receivables.			100% of fair market value, up to any applicable statutory limit	15-41-30(A)(7) of unused (A (1)
Line fr	rom Schedule A/B: 19.1				
	ral: 2019 Tax Refund: Unknown Tax Refund: \$0.00	Unknown		\$0.00	S.C. Code Ann. § 15-41-30(A)(7) of unused (A
	rom Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	(1)
	: 2019 Tax Refund: Unknown Tax Refund: \$1,366; already	Unknown		\$1,366.00	S.C. Code Ann. § 15-41-30(A)(7) of unused (A
recei	_			100% of fair market value, up to any applicable statutory limit	(1)
	oing Social Security	\$0.00		100%	S.C. Code Ann. §
Line II	om scriedule A/D. 33.1			100% of fair market value, up to any applicable statutory limit	15-41-30(A)(11)(a)

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ebtor 1	Frank Gary James, Jr			Case number (if known)	19-02902	
Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own			Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
	ls of the Trade: 2 Dewalt cordless w drivers, 1 Dewalt cordless	\$1,200.00		\$1,200.00	S.C. Code Ann. § 15-41-30(A)(6)	
impa grin bull	der, 4 Cline ling pins & 1 Cline pen; Value: \$1,200 from Schedule A/B: 40.1	t cordless pins & 1 Cline 100% of fair market value, up to any applicable statutory limit		13-41-30(A)(0)		
(Sub	ou claiming a homestead exemption of ject to adjustment on 4/01/22 and every 3			led on or after the date of adjustmen	it.)	
	Yes. Did you acquire the property covere ☐ No	d by the exemption wi	thin 1	,215 days before you filed this case	?	
	☐ Yes					

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			Document Pa	age 13	of 39		
Fill	in this info	ormation to identify you	ır case:				
Deb	otor 1	Frank Gary Jam	nes. Jr				
		First Name		st Name			
Deb	otor 2						
(Spo	use if, filing)	First Name	Middle Name Las	st Name			
Unit	ted States I	Bankruptcy Court for the:	DISTRICT OF SOUTH CAROLINA				
	se number	19-02902				Chook	if this is an
(II KII	iowii)					_	if this is an
						amend	ded filing
		rm 106D e D: Creditors	Who Have Claims Se	cured	by Propert	y	12/15
s ne		the Additional Page, fill it	If two married people are filing together, boout, number the entries, and attach it to thi				
	•	ors have claims secured by	v vour property?				
	-	·	his form to the court with your other sche	edules Yo	u have nothing else t	o report on this form	
	_			ouu.oo. 10	a navo nouning oldo t	o roport on this form.	
		in all of the information	below.				
Par	t 1: List	All Secured Claims			0.1	0.1	0.10
			more than one secured claim, list the creditor		Column A	Column B	Column C
			s a particular claim, list the other creditors in P cal order according to the creditor's name.	Part 2. As	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
	CARRIN	ICTON			value of collateral.	claim	If any
2.1		AGE SERVICES	Describe the property that secures the c	:laim:	\$182,799.00	\$98,175.00	\$84,624.00
	Creditor's Na		4501 Armfield Road Effingham,				
			29541 Florence County				
			TMS#: 97000-28-297 & TMS#:				
	ΔΤΤΝ: Ε	BANKRUPTCY	00250-01-132				
	PO BOX	_	As of the date you file, the claim is: Check	k all that			
		IM, CA 92806	apply. Contingent				
	-	eet, City, State & Zip Code	_ ~				
	Nullibel, Sil	eet, Oity, State & Zip Code	☐ Unliquidated☐ Disputed				
Wh	o owes the	debt? Check one.	Nature of lien. Check all that apply.				
_			☐ An agreement you made (such as mortg	nage or seci	ıred		
_	Debtor 1 only		car loan)	gage of sect			
_	Debtor 2 only		, , , , , , , , , , , , , , , , , , , ,				
_		Debtor 2 only	☐ Statutory lien (such as tax lien, mechani	ic's lien)			
_		of the debtors and another	Judgment lien from a lawsuit	wto o			
	Check if this community	claim relates to a debt	Other (including a right to offset)	ortgage			

Last 4 digits of account number

8107

Opened 06/10 Last Active

Date debt was incurred 5/04/15

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Debtor 1 Frank Gary James, Jr		Case number (if known)	19-02902	
First Name Middle N	lame Last Name			
2.2 FIRST RELIANCE BANK	Describe the property that secures the claim:	\$20,466.00	\$98,175.00	\$20,466.00
Creditor's Name 2170 W PALMETTO ST	4501 Armfield Road Effingham, SC 29541 Florence County TMS#: 97000-28-297 & TMS#: 00250-01-132 As of the date you file, the claim is: Check all that apply.			
FLORENCE, SC 29501	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortgage or car loan)	secured		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien))		
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset) Second	Mortgage		
Opened 08/11 Last Active Date debt was incurred 4/23/19	Last 4 digits of account number 659	0		
Onemain Financial Group, LLC	Describe the property that secures the claim:	\$0.00	\$98,175.00	\$0.00
Creditor's Name	4501 Armfield Road Effingham, SC 29541 Florence County TMS#: 97000-28-297 & TMS#: 00250-01-132			
500 Pamplico Hwy Suite J	As of the date you file, the claim is: Check all that	J		
Florence, SC 29505	apply. □ Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
rumbor, earest, etc., etc. a 2.p eece	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortgage or car loan)	secured		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien))		
☐ At least one of the debtors and another	Judgment lien from a lawsuit	,		
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			

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Debt	or 1 Frank Gary James,		_	Case number (if known)	19-02902	
	First Name M	liddle Name Last Name				
2.4	REPUBLIC FINANCE	Describe the property that secures the	he claim:	\$5,024.00	\$3,000.00	\$2,024.00
	Creditor's Name	Household Goods				
	1337-C SOUTH IRBY					
	STREET	As of the date you file, the claim is: (Check all that			
	Florence, SC 29505	Contingent				
	Number, Street, City, State & Zip Cod	de Unliquidated				
Who	owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.				
_	ebtor 1 only	☐ An agreement you made (such as n	nortgage or se	ecured		
_	ebtor 1 only ebtor 2 only	car loan)	nortgage or st	courca		
	ebtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, med	hanic's lien)			
_	least one of the debtors and and	other	,			
	heck if this claim relates to a	Other (including a right to offset)	Non-Purc	hase Money Security		
C	ommunity debt					
	Opened					
	07/18 L Active	ast				
Date	debt was incurred 3/11/19	Last 4 digits of account numb	er 4044			
A -1		as in Column A on this year. White that your	b	¢200 200	00	
	•	es in Column A on this page. Write that numb n, add the dollar value totals from all pages.	oer nere:	\$208,289		
	te that number here:	,		\$208,289	.00	
Part	2: List Others to Be Notif	ied for a Debt That You Already Listed				
trying than	g to collect from you for a debt one creditor for any of the deb	rs to be notified about your bankruptcy for a you owe to someone else, list the creditor in ts that you listed in Part 1, list the additional	n Part 1, and	then list the collection age	ncy here. Similarly, if yo	ou have more
debts	s in Part 1, do not fill out or sub	omit this page.				
Ш	Name, Number, Street, City, St	tate & Zip Code	On wh	nich line in Part 1 did you ente	er the creditor? _2.1_	
	FHA 451 7th Street SW		Loot 4	digits of account number		
	Washington, DC 20410		Lasi 4	digits of account number	-	
$\overline{}$	-					
	Name, Number, Street, City, St	ate & Zip Code	On wh	nich line in Part 1 did you ente	er the creditor? 2.1	
	FINKEL LAW FIRM					
	Attn: Elizabeth S. Moor	re	Last 4	digits of account number1	5/4	
	North Charleston, SC 2	29415				
\Box						
Ш	Name, Number, Street, City, St	tate & Zip Code	On wh	nich line in Part 1 did you ente	er the creditor? 2.1	
	Philip S Porter Attorney for SCDMV		last 4	digits of account number 1	574	
	PO Box 1498		Last	algits of account number	<u></u>	
	Blythewood, SC 29016					
$\overline{\Box}$						
	Name, Number, Street, City, St Stanwich Mortgage Lo		On wh	nich line in Part 1 did you ente	er the creditor? 2.1	
	Wilmington Savings Fu		Last 4	digits of account number 1	574	
	PO Box 71727	-		<u> </u>		
	North Charleston, SC 2	29415				
\Box						<u> </u>
J	Name, Number, Street, City, St US Department of Vete	•	On wh	ich line in Part 1 did you ente	er the creditor? 2.1	
	PO Box 530269	nans Alans	Last 4	digits of account number	_	
	Atlanta, GA 30353			_		

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

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Debto	or 1 Frank Gary J	lames, Jr		Case number (if known)	19-02902
	First Name	Middle Name	Last Name		
		t, City, State & Zip Code of Veterans Affairs		On which line in Part 1 did you ento	er the creditor? 2.1
	Name, Number, Stree USDA PO BOX 66827 Saint Louis, MO	t, City, State & Zip Code		On which line in Part 1 did you ento	

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		Document	Page 17 of 3	39			
Fill in this inform	nation to identify your o	case:					
Debtor 1	Frank Gary James	s, Jr					
	First Name	Middle Name	Last Name				
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name				
United States Ba	nkruptcy Court for the:	DISTRICT OF SOUTH CAR	OLINA				
Case number	19-02902						
(if known)							if this is an ed filing
Official Forn	n 106E/F						
Schedule E	F: Creditors W	ho Have Unsecure	d Claims				12/15
Schedule D: Credit left. Attach the Con name and case nur	ors Who Have Claims Secu atinuation Page to this page onber (if known).	ired Leases (Official Form 106G ured by Property. If more space e. If you have no information to	is needed, copy the Par	t you need, fill it out, i	number the e	entries ir	the boxes on the
	II of Your PRIORITY Un						
_	ors have priority unsecured	d claims against you?					
☐ No. Go to P ■ Yes.	art 2.						
2. List all of your identify what typossible, list the	pe of claim it is. If a claim ha e claims in alphabetical orde	s. If a creditor has more than one p s both priority and nonpriority amo r according to the creditor's name rticular claim, list the other creditor	ounts, list that claim here a . If you have more than tw	and show both priority a	nd nonpriority	y amount	s. As much as
(For an explana	ation of each type of claim, s	ee the instructions for this form in	the instruction booklet.)	Total claim	Priority amount		Nonpriority amount
2.1 FLOREI	NCE COUNTY URER	Last 4 digits of acc	ount number	\$0.00		\$0.00	\$0.00
PO BOX	editor's Name K 100501	When was the debt	incurred?				
	treet City State Zip Code	As of the date you	file, the claim is: Check a	all that apply			
	d the debt? Check one.	☐ Contingent					
■ Debtor 1 c	only	☐ Unliquidated					
Debtor 2 o	only	☐ Disputed					
Debtor 1 a	and Debtor 2 only	Type of PRIORITY	unsecured claim:				
☐ At least or	ne of the debtors and anothe	r Domestic suppor	t obligations				
	his claim is for a commun	_	n other debts you owe the	government			
Is the claim s	subject to offset?	☐ Claims for death	or personal injury while yo	ou were intoxicated			
■ No		☐ Other. Specify _					
☐ Yes			Notice Only				

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Debtor 1 Frank Gary James, Jr	Case number (if known)	19-02902	
Priority Creditor's Name PO BOX 7346 Philadelphia, PA 19101-7346 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another	Last 4 digits of account number \$0.00 When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations	\$0.00	\$0.00
☐ Check if this claim is for a community de Is the claim subject to offset? ■ No ☐ Yes	■ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were intoxicated □ Other. Specify Notice Only		
SC Department of Revenue Priority Creditor's Name PO Box 12265 Columbia, SC 29211 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community delisthe claim subject to offset? No Yes	Last 4 digits of account number \$0.00 When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Notice Only	\$0.00	\$0.00
■ Yes.		for has more than one non	oriority
unsecured claim, list the creditor separately for ea	ach claim. For each claim listed, identify what type of claim it is. Do not list cl other creditors in Part 3.If you have more than three nonpriority unsecured c	aims already included in P	art 1. If more

Total claim

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Frank Gary James, Jr		Case Humber (ir known) 19-02902	
FINANCIAL DATA SYSTEMS	Last 4 digits of account number	9912	\$94.00
ATTN: BANKRUPTCY	When was the debt incurred?	Opened 04/14	
WRIGHTSVILLE BEACH, NC 28480 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Пол		
_			
	· .	d claim:	
	<u></u>		
debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	<u>-</u>	g plans, and other similar debts	
□ Yes			
JEFFERSON CAPITAL SYSTEMS, LLC	Last 4 digits of account number	5003	\$74.00
PO BOX 1999	When was the debt incurred?	Opened 10/15	
Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
_	П		
•			
		d claim:	
_	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	rration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	■ Other. Specify Factoring (WIRELESS	Company Account VERIZON	
RECEIVABLES MANAGEMENT CORPORATION	Last 4 digits of account number	7720	\$654.00
Nonpriority Creditor's Name ATTN: BANKRUPTCY PO BOX 50685	When was the debt incurred?	Opened 02/19	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sens	uration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	nation agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Collection	Attorney STOKES EYE CENTER	
	FINANCIAL DATA SYSTEMS Nonpriority Creditor's Name ATTN: BANKRUPTCY PO BOX 688 WRIGHTSVILLE BEACH, NC 28480 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Nonpriority Creditor's Name PO BOX 1999 SAINT CLOUD, MN 56302 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes RECEIVABLES MANAGEMENT CORPORATION Nonpriority Creditor's Name ATTN: BANKRUPTCY PO BOX 50685 COLUMBIA, SC 29250 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another CORPORATION Nonpriority Creditor's Name ATTN: BANKRUPTCY PO BOX 50685 COLUMBIA, SC 29250 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No	Second color Same Same	Last 4 digits of account number 9912

Official Form 106 E/F

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Debtor	1 Frank Gary James, Jr		Case number (if known) 19-02902	
4.4	RECEIVABLES MANAGEMENT CORPORATION	Last 4 digits of account number	3031	\$89.00
	Nonpriority Creditor's Name ATTN: BANKRUPTCY	When was the debt incurred?	Opened 07/14	
	PO BOX 50685 COLUMBIA, SC 29250 Number Street City State Zip Code	As of the date you file, the claim	is. Chack all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	э. Опеск ан шасарру	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Collection	Attorney MEDICAL ANESTHESIA	
4.5	RSI EAST Nonpriority Creditor's Name	Last 4 digits of account number	3076	\$90.00
	ATTN: BANKRUPTCY 1325 GARNER LANE STE C COLUMBIA, SC 29210	When was the debt incurred?	Opened 04/17	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	•	,	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	■ Other. Specify Collection ORTHOPA	Attorney MCLEOD EDICS ASSOCIATES	
4.6	TEKCOLLECT INC	Last 4 digits of account number	4753	\$729.00
	Nonpriority Creditor's Name ATTN: BANKRUPTCY PO BOX 1269	When was the debt incurred?	Opened 05/16	
	COLUMBUS, OH 43216			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Collection COSMETIC	Attorney FAMILY AND DENTISTRY	

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

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Debtor 1 Frank Gary James, Jr		Case number (if known)	19-02902
have more than one creditor for any of the de notified for any debts in Parts 1 or 2, do not fi		the additional creditors here. If yo	u do not have additional persons to be
Name and Address	•	2 did you list the original creditor?	
ATTORNEY GENERAL OF THE	Line 2.2 of (<i>Check one</i>):	■ Part 1: Creditors with Prior	ity Unsecured Claims
UNITED STATES		☐ Part 2: Creditors with Non	priority Unsecured Claims
DEPT OF JUSTICE, ROOM 5111 10TH AND CONSTITUTION			
AVENUE. NW			
Washington, DC 20530			
,	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2	2 did you list the original creditor?	
US ATTORNEYS OFFICE	Line 2.2 of (Check one):	Part 1: Creditors with Prior	ity Unsecured Claims

Name and Address
US ATTORNEYS OFFICE
JOHN DOUGLAS BARNETT ESQ
1441 MAIN STREET SUITE 500
Columbia, SC 29201

☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Т	otal Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				Т	otal Claim
Total	6f.	Student loans	6f.	\$	0.00
claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	1,730.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	1,730.00

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Fill in this infor				
Debtor 1	Frank Gary Jame	s, Jr		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		DISTRICT OF SOUTH (CAROLINA	
Case number	19-02902			
(if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Numbe	whom you have the r, Street, City, State and ZIP	e contract or lease Code	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.3	City		State	ZIF Code	
2.5	Name				
	Number	Street			
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5	,		3.0.0	5546	
	Name				_
	Number	Street			
	City		State	ZIP Code	_
	J.1.5		Olulo	2.1. 0000	

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		Docume	nı rayezsi	ט וו	
Fill in this	information to identify your	case:			
Debtor 1	Frank Gary Jame	s. Jr			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filin	rg) First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	DISTRICT OF SOUTH (JARULINA		
Case numb	per 19-02902				
(if known)					☐ Check if this is an amended filing
					amended ming
Official	Form 106H				
Sched	ule H: Your Cod	ebtors			12/15
our name 1. Do y	and case number (if known) you have any codebtors? (If	. Answer every question			p of any Additional Pages, write
■ No □ Yes					
Arizona	nin the last 8 years, have you a, California, Idaho, Louisiana, Go to line 3.				ty states and territories include
☐ Yes	. Did your spouse, former spou	use, or legal equivalent live	e with you at the time?		
in line Form ′	2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make	sure you have listed t	g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor lame, Number, Street, City, State and Zl	P Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, lir	ne
	Name			☐ Schedule E/F,	
				☐ Schedule G, lir	ne
1	Number Street			_	
	City	State	ZIP Code		
3.2				☐ Schedule D, lir	ne
	Name			☐ Schedule E/F,	line
				☐ Schedule G, lir	ne
1	Number Street			_	
(City	State	ZIP Code		

Fill in this information t	to identify your case:	
Debtor 1	Frank Gary James, Jr	_
Debtor 2 (Spouse, if filing)		_
United States Bankrup	otcy Court for the: DISTRICT OF SOUTH CAROLINA	_
Case number (If known)	-02902	Check if this is: An amended filing A supplement showing postpetition chapter
Official Form	1061	13 income as of the following date: MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
If you have more than one job,	Employment status	■ Employed	■ Employed
attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed
employers.	Occupation	Self-Employed	Office Manager
Include part-time, seasonal, or self-employed work.	Employer's name	Gary James Construction	MCLEOD HEALTH
Occupation may include student Employer's add or homemaker, if it applies.		4501 Armfield Road Effingham, SC 29541	555 EAST CHEVES STREET Florence, SC 29506
	How long employed ti	here? 7 years	24 years

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 0.00 \$ 3,258.39

3. Estimate and list monthly overtime pay.

3. +\$ 0.00 +\$ 0.00

4. Calculate gross Income. Add line 2 + line 3.

Official Form 106I Schedule I: Your Income page 1

Deb	tor 1	Frank Gary James, Jr	_	Cas	se number (if known)	19-02902		
	Cop	by line 4 here	4.	F0	or Debtor 1	For Debtor non-filing s		
5.	List	t all payroll deductions:						
0.	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	417.13	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	325.85	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	
	5e.	Insurance	5e.	\$	0.00	\$	955.37	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	
	5g.	Union dues	5g.	\$	0.00	\$	0.00	
	5h.	' ' ===================================	5h.+			+ \$	0.00	
6.		d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00		,698.35	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$.	0.00	\$ <u>1</u>	,560.04	
8.	Lis 1 8a.	profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	90	ď	4 004 50	e	0.00	
	8b.	monthly net income. Interest and dividends	8a. 8b.	\$ \$	1,094.50 0.00	\$ \$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive		Ψ.	0.00	Ψ	0.00	
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	0.00	
	8d.	• • •	8d.	\$	0.00	\$	0.00	
	8e.	Social Security	8e.	\$	1,771.00	\$	0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	\$	0.00	\$	0.00	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	0.00	
	8h.	Other monthly income. Specify:	8h.+	- \$	0.00	+ \$	0.00	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	2,865.50	\$	0.00	
10.		culate monthly income. Add line 7 + line 9. If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		2,865.50 + \$	1,560.04	= \$	4,425.54
11.	State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00							
12.		If the amount in the last column of line 10 to the amount in line 11. The rest te that amount on the Summary of Schedules and Statistical Summary of Certailies					\$	4,425.54
							Combin	ed / income
13.	Do ■ □	you expect an increase or decrease within the year after you file this form No. Yes. Explain:	1?					
	_	• • • • • • • • • • • • • • • • • • •						

Official Form 106l Schedule I: Your Income page 2

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United States Bankruptcy Court District of South Carolina

In re Frank G	ary James, Jr			Case No.	19-02902	
		Debtor(s)	(Chapter	13	
	BUSINES	S INCOME AND	EXPENSI	ES		
<u>FINANCIA</u>	L REVIEW OF THE DEBTOR'S I	BUSINESS (NOTE: ONLY IN	NCLUDE informat	ion directly	related to the busine	ss operation.)
PART A - GROSS	S BUSINESS INCOME FOR PRE	VIOUS 12 MONTHS:				
1. Gross Inco	ome For 12 Months Prior to Filing:		\$		0.00	
PART B - ESTIM	ATED AVERAGE FUTURE GRO	OSS MONTHLY INCOME				
2. Gross Mor	nthly Income				\$	3,028.33
PART C - ESTIM	ATED FUTURE MONTHLY EX	PENSES:				
3. Net Emplo	oyee Payroll (Other Than Debtor)		\$		0.00	
4. Payroll Ta	xes				0.00	
5. Unemploy	ment Taxes		_		0.00	
6. Worker's C	Compensation		_		0.00	
7. Other Taxe	es		_		0.00	
8. Inventory	Purchases (Including raw materials)				0.00	
9. Purchase o	of Feed/Fertilizer/Seed/Spray				0.00	
10. Rent (Oth	ner than debtor's principal residence)		_		0.00	
11. Utilities					0.00	
12. Office Ex	xpenses and Supplies				75.00	
13. Repairs a	nd Maintenance		_		0.00	
14. Vehicle F	Expenses		_		0.00	
15. Travel an	d Entertainment		_		0.00	
16. Equipmen	nt Rental and Leases		_		0.00	
17. Legal/Ac	counting/Other Professional Fees		_		29.17	
18. Insurance					0.00	
19. Employe	e Benefits (e.g., pension, medical, etc.)		_		0.00	
20. Payments	s to Be Made Directly By Debtor to Secured	d Creditors For Pre-Petition Busin	ness Debts (Specify):		
DES	SCRIPTION		TOTAL			
Licenses			22.58			
Fuel Repairs &	Maintenance on Work Truck		200 78.75			
Cost of M			1095			
Cost of La	abor		433.33			
21. Other (Sp	pecify):					

TOTAL

DESCRIPTION

22. Total Monthly Expenses (Add items 3-21)

PART D - ESTIMATED AVERAGE NET MONTHLY INCOME:

23. AVERAGE NET MONTHLY INCOME (Subtract item 22 from item 2)

1,933.83

Fill	in this information to identify your case:					
	otor 1 Frank Gary James, J	r		Check	c if this is:	
	Flank Gary James, J	ı	_		An amended filing	
	otor 2 ouse, if filing)				A supplement show 3 expenses as of t	ring postpetition chapter
(Spc	ouse, ii iiiiig)			_	o expenses as on	dile iollowing date.
Unit	ted States Bankruptcy Court for the: DISTR	ICT OF SOUTH CAROLINA	<i>P</i>	N	MM / DD / YYYY	
1	se number 19-02902 (nown)					
Of	fficial Form 106J					
So	chedule J: Your Exper	nses				12/15
Be info	as complete and accurate as possible ormation. If more space is needed, atta mber (if known). Answer every question	. If two married people ar				
Par 1.	rt 1: Describe Your Household Is this a joint case?					
١.	No. Go to line 2.					
	☐ Yes. Does Debtor 2 live in a separ	ate household?				
	□ No					
	☐ Yes. Debtor 2 must file Office	ial Form 106J-2, <i>Expenses</i>	for Separate House	hold of Debto	or 2.	
2.	Do you have dependents? ■ No					
	Do not list Debtor 1 and Yes. Debtor 2.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not state the					□ No
	dependents names.					☐ Yes
						□ No □ Yes
			-			□ No
						☐ Yes
						□ No
3.	Do your expenses include	L				☐ Yes
٥.	expenses of people other than	l No l Yes				
	yourself and your dependents?	1 165				
Est exp	rt 2: Estimate Your Ongoing Month timate your expenses as of your bankr penses as of a date after the bankrupto plicable date.	uptcy filing date unless y				
the	clude expenses paid for with non-cash e value of such assistance and have in fficial Form 106l.)				Your expe	enses
•	,					
4.	The rental or home ownership exper payments and any rent for the ground of		nclude first mortgage	4. \$		0.00
	If not included in line 4:					
	4a. Real estate taxes			4a. \$		0.00
	4b. Property, homeowner's, or renter			4b. \$		0.00
	4c. Home maintenance, repair, and			4c. \$		125.00
5.	4d. Homeowner's association or con Additional mortgage payments for ve		me equity loans	4d. \$ 5. \$		0.00

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Debtor 1 Fr	rank Gary James, Jr	Case num	ber (if known)	19-02902
. Utilities:	:			
6a. Ele	ectricity, heat, natural gas	6a.	\$	320.00
6b. Wa	ater, sewer, garbage collection	6b.	\$	50.00
6c. Te	elephone, cell phone, Internet, satellite, and cable services	6c.	\$	205.00
6d. Ot	her. Specify:	6d.	\$	0.00
	d housekeeping supplies		\$	690.00
	re and children's education costs	8.	\$	0.00
Clothing	g, laundry, and dry cleaning	9.	\$	160.00
). Persona	Il care products and services	10.	\$	70.00
	and dental expenses	11.	\$	110.00
	ortation. Include gas, maintenance, bus or train fare.			
	nclude car payments.	12.	\$	400.00
3. Entertai	nment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
. Charitab	ole contributions and religious donations	14.	\$	0.00
5. Insurano	ce.			
Do not in	nclude insurance deducted from your pay or included in lines 4 or 20.			
15a. Lif	fe insurance	15a.	\$	0.00
15b. He	ealth insurance	15b.	\$	0.00
15c. Ve	ehicle insurance	15c.	\$	135.00
15d. Ot	ther insurance. Specify:	15d.	\$	0.00
S. Taxes. D	Do not include taxes deducted from your pay or included in lines 4 or 20.			
Specify:	AUTO PROPERTY TAXES	16.	\$	29.00
7. Installm	ent or lease payments:			
17a. Ca	ar payments for Vehicle 1	17a.	\$	0.00
17b. Ca	ar payments for Vehicle 2	17b.	\$	0.00
17c. Ot	her. Specify:	17c.	\$	0.00
17d. Ot	her. Specify:	17d.	\$	0.00
3. Your pay	yments of alimony, maintenance, and support that you did not report	as		
	d from your pay on line 5, Schedule I, Your Income (Official Form 106	I). 18.		0.00
Other pa	ayments you make to support others who do not live with you.		\$	0.00
Specify:		19.		
	al property expenses not included in lines 4 or 5 of this form or on So			
	ortgages on other property	20a.	·	0.00
	eal estate taxes	20b.		0.00
	operty, homeowner's, or renter's insurance	20c.	·	0.00
20d. Ma	aintenance, repair, and upkeep expenses	20d.	\$	0.00
20e. Ho	omeowner's association or condominium dues	20e.	\$	0.00
I. Other: S	Specify:	21.	+\$	0.00
0-11-4				
	te your monthly expenses Il lines 4 through 21.		•	2 22 4 22
	•	2	\$	2,394.00
	by line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-	2	\$	
22c. Add	l line 22a and 22b. The result is your monthly expenses.		\$	2,394.00
Calculat	te your monthly net income.			
	opy line 12 (your combined monthly income) from Schedule I.	23a.	\$	4,425.54
	ppy your monthly expenses from line 22c above.	23b.	·	2,394.00
200. 00	by your monthly expenses nomine 220 above.	۷۵۵.	_Ψ	2,394.00
230 81	ubtract your monthly expenses from your monthly income.			
	ne result is your <i>monthly net income</i> .	23c.	\$	2,031.54
4. Do you 6 For examp modification	expect an increase or decrease in your expenses within the year after ple, do you expect to finish paying for your car loan within the year or do you expect you to the terms of your mortgage?			ease or decrease because of a
■ No.	Fundain hanne			
Yes.	Explain here:			

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Fill in this inform	nation to identify you	r case:			
Debtor 1	Frank Gary Jam	es. Jr			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the:	DISTRICT OF SOUTH CARO	LINA		
Case number	19-02902				
(if known)					Check if this is an amended filing
0.60	4000				
Official Forn					
Declarat	ion About	an Individual De	ebtor's Sched	ules	12/15
obtaining money years, or both. 18		file bankruptcy schedules or ar in connection with a bankruptc 1519, and 3571.			
Olgi	I Delow				
Did you pay	y or agree to pay som	eone who is NOT an attorney to	o help you fill out bankrupt	tcy forms?	
■ No					
☐ Yes. N	lame of person				etition Preparer's Notice, nature (Official Form 119)
	ity of perjury, I declar true and correct.	e that I have read the summary	and schedules filed with t	his declaration and	
X /s/ Fran	nk Gary James, Jr		X		
Frank (Gary James, Jr e of Debtor 1		Signature of Debtor 2	2	

Date

Date June 19, 2019

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FIII	in this inform	nation to identify you	r case:			
Deb	tor 1	Frank Gary Jam	es, Jr Middle Name	Last Name		
	tor 2 use if, filing)	First Name	Middle Name	Last Name		
` '		kruptcy Court for the:	DISTRICT OF SOUTH CA	AROLINA		
Can	a number 4	0.0000				
(if kno		9-02902			_	theck if this is an mended filing
Sta		of Financial	Affairs for Individ		<u> </u>	4/19
infor	mation. If me		attach a separate sheet to		equally responsible for sup additional pages, write you	
			erital Status and Where You	Lived Before		
1.	_	current marital statu	is?			
	■ Married□ Not marr	ried				
2.	During the la	st 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. List	all of the places you l	ived in the last 3 years. Do no	ot include where you live now	·.	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory co, Texas, Washington and W	
	■ No □ Yes. Ma	ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Part	2 Explain	n the Sources of You	r Income			
	Fill in the total	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receiv	all businesses, including part-		ndar years?
	□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until I for bankruptcy:	☐ Wages, commissions, bonuses, tips	\$19,145.00	☐ Wages, commissions, bonuses, tips	
			Operating a business		☐ Operating a business	

Official Form 107

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Debtor 1 Frank Gary James, Jr Case number (if known) 19-02902 **Debtor 1** Debtor 2 Sources of income **Gross income** Sources of income **Gross income** (before deductions and Check all that apply. Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$27,800.00 ☐ Wages, commissions, ☐ Wages, commissions, (January 1 to December 31, 2018) bonuses, tips bonuses, tips ☐ Operating a business Operating a business For the calendar year before that: \$31,050.00 ☐ Wages, commissions, □ Wages, commissions, (January 1 to December 31, 2017) bonuses, tips bonuses, tips ☐ Operating a business Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) From January 1 of current year until Social Security \$5,313.00 the date you filed for bankruptcy: Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose," During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more? □ No. Go to line 7. □ Yes List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? □ No.

> List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an

attorney for this bankruptcy case.

Go to line 7.

Yes

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Debtor 1 Frank Gary James, Jr Case number (if known) 19-02902

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	REPUBLIC FINANCE 1337-C SOUTH IRBY STREET Florence, SC 29505	3/2019, 4/2019, 5/2019	\$720.00	\$5,024.00	 ☐ Mortgage ☐ Car ☐ Credit Card ■ Loan Repayment ☐ Suppliers or vendors ☐ Other
	FIRST RELIANCE BANK 2170 W PALMETTO ST FLORENCE, SC 29501	3/2019, 4/2019, 5/2019, 6/2019	\$1,595.72	\$20,466.00	☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other 2nd Mortgage
7.	Within 1 year before you filed for bankruptous Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony. No Yes. List all payments to an insider.	rtners; relatives of any gen control, or owner of 20% o	eral partners; partner r more of their votin	erships of which yo g securities; and a	ou are a general partner; corporations ny managing agent, including one for
	Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for this payment
	insider 5 Name and Address	Dates of payment	paid	still owe	Reason for this payment
8.	Within 1 year before you filed for bankrupte insider? Include payments on debts guaranteed or cos No Yes. List all payments to an insider Insider's Name and Address		Total amount	Amount you	Reason for this payment
			paid	still owe	Include creditor's name
Par	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures			
9.	Within 1 year before you filed for bankruptor. List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.				
	Case title Case number	Nature of the case	Court or agency		Status of the case
	Wilmington Savings Fund Society VS Natalie P James , defendant, et al 2018CP2101574	Foreclosure	County of Flor	ence	☐ Pending ☐ On appeal ☐ Concluded
	Wilmington Savings Fund Society VS Natalie P James , defendant, et al 2018LP2100184	Lis Pendens	County of Flor	ence	☐ Pending ☐ On appeal ☐ Concluded

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Case number (if known) 19-02902

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. ☐ Yes. Fill in the information below **Creditor Name and Address Describe the Property** Date Value of the property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ■ No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Value Describe what you contributed Dates vou more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of Address transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You

Official Form 107

Debtor 1

Frank Gary James, Jr

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Debtor 1 Frank Gary James, Jr Case number (if known) 19-02902

	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any pro transferred	Date payment or transfer was made	Amount of payment				
	Reed Law Firm, P.A. 1807 W Evans Street Suite B Florence, SC 29501 ereed@reedlawsc.com	Fees & Costs: \$465 Attorney fees received prior \$35	5/2019 to filing:	\$500.00				
17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details.							
	Person Who Was Paid Address	Description and value of any protransferred	Date payment or transfer was made	Amount of payment				
	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.							
	Person Who Received Transfer Address	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made				
	Person's relationship to you		paid in exchange					
	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details.							
	Name of trust	Description and value of the pro	perty transferred	Date Transfer was made				
Par	8: List of Certain Financial Accounts, Instr	uments, Safe Deposit Boxes, and S	torage Units					
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?							
	Include checking, savings, money market, or on the houses, pension funds, cooperatives, associated. No Yes. Fill in the details.			unions, brokerage				
		ast 4 digits of Type of acco ccount number instrument	unt or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer				
21.	Do you now have, or did you have within 1 yeacash, or other valuables?	ar before you filed for bankruptcy, a	ny safe deposit box or other deposi	tory for securities,				
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?				

Doc 12 Filed 06/19/19 Entered 06/19/19 13:21:55 Desc Main Case 19-02902-dd Page 35 of 39 Document Case number (if known) 19-02902 Debtor 1 Frank Gary James, Jr 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

		•					
	No						
	☐ Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City,	Describe the contents	Do you still have it?			
Par	t 9: Identify Property You Hold or Control for	State and ZIP Code) Someone Else					
	Do you hold or control any property that someo		ty you borrowed from are storing for	r or hold in trust			
23.	for someone.	nie eise owns: include any proper	ty you borrowed from, are storing for	i, or note in trust			
	■ No □ Yes. Fill in the details.						
	Owner's Name	Where is the property?	Describe the property	Value			
	Address (Number, Street, City, State and ZIP Code)	(Number, Street, City, State and ZIP Code)	become the property	Value			
Par	t 10: Give Details About Environmental Informa	ation					
For	the purpose of Part 10, the following definitions	apply:					
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these substances.	ir, land, soil, surface water, ground	- ·				
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	_	law, whether you now own, operate,	or utilize it or used			
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or s		s waste, hazardous substance, toxic s	substance,			
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of whe	n they occurred.				
24.	Has any governmental unit notified you that you	u may be liable or potentially liable	under or in violation of an environme	ental law?			
	_						
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of any release of hazardous material?						
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice			
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.						
	■ No □ Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case			
Par	t11: Give Details About Your Business or Con	nections to Any Business					
27.	Within 4 years before you filed for bankruptcy, o	did you own a business or have ar	ny of the following connections to any	y business?			
	■ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time						
	☐ A member of a limited liability company	(LLC) or limited liability partnersh	ip (LLP)				
Offic	al Form 107 Statement of	of Financial Affairs for Individuals Filing	a for Bankruptcy	page			

Case 19-02902-dd Doc 12 Filed 06/19/19 Entered 06/19/19 13:21:55 Desc Main Page 36 of 39 Document Case number (if known) 19-02902 Debtor 1 Frank Gary James, Jr ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed **Gary James Construction** EIN: 1224 Business is a sole-proprietorship 4501 Armfield Road operating as a contractor. From-To 2012-current Effingham, SC 29541 Business has no assets, no employees and no account receivables. **Osteens Tax** 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. **Date Issued** Name Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Frank Gary James, Jr Signature of Debtor 2 Frank Gary James, Jr Signature of Debtor 1 Date June 19, 2019 **Date** Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this information to identify your case:							
Debtor 1	Frank Gary James, Jr						
Debtor 2 (Spouse, if filing)							
United States B	United States Bankruptcy Court for the: District of South Carolina						
Case number (if known)	19-02902						

Check as directed in lines 17 and 21:							
	According to the calculations required by this Statement:						
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).						
	Disposable income is determined under 11 U.S.C. § 1325(b)(3).						
	3. The commitment period is 3 years.						
	4. The commitment period is 5 years.						

 \square Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
 - □ Not married. Fill out Column A, lines 2-11.
 - Married. Fill out both Columns A and B. lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

		Column A Debtor 1	Column Debtor non-fili	. –
Your gross wages, salary, tips, bonuses, overtim payroll deductions).	e, and commissions (before all	\$	\$	3,258.39
 Alimony and maintenance payments. Do not inclu- Column B is filled in. 	de payments from a spouse if	\$	\$	0.00
 All amounts from any source which are regularly of you or your dependents, including child support from an unmarried partner, members of your househ and roommates. Do not include payments from a spoyou listed on line 3. Net income from operating a business, profession, or farm 	ort. Include regular contributions old, your dependents, parents,	\$	\$	0.00
Gross receipts (before all deductions)	3,028.33			
Ordinary and necessary operating expenses	1,933.83			
Net monthly income from a business, profession, or farm	Copy 1,094.50 here ->	\$1,094.50	\$	0.00
6. Net income from rental and other real property	Debtor 1			
Gross receipts (before all deductions)	\$0.00_			
Ordinary and necessary operating expenses	-\$ <u>0.00</u>			
Net monthly income from rental or other real property	$_{\prime}$ $\$$ 0.00 Copy here ->	\$ 0.00	\$	0.00

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Debtor 1	Frank Gary James, Jr	_	Case number	er (<i>if known</i>)	19-02902	2	
			Column A Debtor 1		Column B Debtor 2 onon-filing		
	nterest, dividends, and royalties		\$	0.00	\$	0.00	
	Inemployment compensation		\$	0.00	. \$	0.00	
	Oo not enter the amount if you contend that the amount received was the Social Security Act. Instead, list it here:		er				
	For you\$	0.00					
	For your spouse \$	0.00					
b	Pension or retirement income. Do not include any amount received penefit under the Social Security Act.		\$	0.00	\$	0.00	
re d	ncome from all other sources not listed above. Specify the source to not include any benefits received under the Social Security Act or peceived as a victim of a war crime, a crime against humanity, or interplomestic terrorism. If necessary, list other sources on a separate page otal below.	payments national or	\$_	0.00	\$	0.00	
			\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.	+	+ \$	0.00	\$	0.00	
	Calculate your total average monthly income. Add lines 2 through each column. Then add the total for Column A to the total for Column		1,094.50	+ \$ _	3,258.39	= \$_	4,352.89
12. C	Copy your total average monthly income from line 11.					\$	4,352.89
	You are not married. Fill in 0 below.						
	You are married and your spouse is filing with you. Fill in 0 below	<i>I</i> .					
	You are married and your spouse is not filing with you.						
	Fill in the amount of the income listed in line 11, Column B, that we dependents, such as payment of the spouse's tax liability or the state of the spouse of the spouse of the state of the spouse of th						
	Below, specify the basis for excluding this income and the amour adjustments on a separate page.	nt of income de	evoted to eac	h purpos	e. If necessary	y, list addi	itional
	If this adjustment does not apply, enter 0 below.	•					
		\$		_			
		Ψ +\$					
	Total	\$ _	0.0	00 c	opy here=>		0.00
14.	Your current monthly income. Subtract line 13 from line 12.					\$	4,352.89
15.	Calculate your current monthly income for the year. Follow these	e steps:					4.070.55
	15a. Copy line 14 here=>					\$	4,352.89
	Multiply line 15a by 12 (the number of months in a year).					X	10
							12

Debtor 1

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Debte	or 1	Fran	k Gary James, Jr		Case number (if known)	19-02902	
16	. Cal	culate	the median family income that applies to y	ou. Follow these	e steps:		
	16a	ı. Fill in	the state in which you live.	sc			
	16b	. Fill in	the number of people in your household.	2			
	16c	. Fill in	the median family income for your state and s	size of househole	 d.	9	59,822.00
			nd a list of applicable median income amounts actions for this form. This list may also be avail				·
17	. Hov		ne lines compare?	able at the bank	duploy dictive diffice.		
	17a	i. =	Line 15b is less than or equal to line 16c. O 11 U.S.C. § 1325(b)(3). Go to Part 3. Do N		•		
	17b	o. 🗆 •	Line 15b is more than line 16c. On the top of 1325(b)(3). Go to Part 3 and fill out Calcu your current monthly income from line 14 al	lation of Your I			
Par	t 3:	Cal	culate Your Commitment Period Under 11	J.S.C. § 1325(b)(4)		
18.	Cop	oy you	r total average monthly income from line 1	1.		\$	4,352.89
19.	con	tend th	e marital adjustment if it applies. If you are lat calculating the commitment period under 1 ncome, copy the amount from line 13.			our	
			marital adjustment does not apply, fill in 0 on	line 19a.		- \$	0.00
	19b	. Subt	ract line 19a from line 18.			\$	4,352.89
20.			your current monthly income for the year.				4,352.89
	20a						,
		Multip	oly by 12 (the number of months in a year).			Γ	x 12
	20b	. The r	result is your current monthly income for the year	ear for this part o	of the form	!	52,234.68
	20c	. Copy	the median family income for your state and	size of househol	d from line 16c		59,822.00
	21.	How	do the lines compare?				
			Line 20b is less than line 20c. Unless otherwis period is 3 years. Go to Part 4.	se ordered by the	e court, on the top of page 1 of this f	form, check box	3, The commitment
			Line 20b is more than or equal to line 20c. Un commitment period is 5 years. Go to Part 4.	ess otherwise o	ordered by the court, on the top of pa	age 1 of this form	, check box 4, The
Par	t 4:	Sig	n Below				
	By	signing	here, under penalty of perjury I declare that the	ne information o	n this statement and in any attachme	ents is true and o	correct.
)	(/s	/ Fran	k Gary James, Jr				
			Gary James, Jr e of Debtor 1				
		•	ne 19, 2019				
		MM	/DD /YYYY				
			cked 17a, do NOT fill out or file Form 122C-2.	ala farma O:- !!	20 of that farms		
	IT YC	ou cned	cked 17b, fill out Form 122C-2 and file it with t	iis torm. On line	ะ จอ บา เกลเ กิดาm, copy your current n	nonthly income fi	om ime 14 above.